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MEMORANDUM

DEPARTMENT OF HEALTH, EDUCATION, AND WELFARE
PUBLIC HEALTH SERVICE
FOOD AND DRUG ADMINISTRATION

TO : Surgeon General
Through: Associate Chief for Environmental Health

DATE:

FROM : Chief, Division of Radiological Health

SUBJECT: Thyroid abnormalities revealed by field study of Utah and Arizona students

Early, preliminary results have been received on the thyroid portion of the study described in the attached news release of September 16, 1965. Three physicians made independent thyroid examinations on each of approximately 2200 children in Washington County, Utah, and on a control group of approximately 1400 children in Graham County, Arizona. Positive findings in which at least two of the three examiners concurred are very briefly summarized below:

	Wash. Co., Utah	Graham Co., Ariz.
Thyroid visible, palpable and nodular	40	8

After all of the initial observations were made, the 40 students in Utah were reassembled and reexamined by all six physicians for the purpose of reaching a consensus on the findings. There was agreement that 18 of these students had nodular thyroid glands requiring further clinical evaluation. A similar consensus session will be carried out in Graham County, Arizona, as soon as the six physicians can reassemble there.

Of the 18 students on whom there was agreement of nodular thyroid, one was a 30 year old woman (a student also), recently arrived in Washington County. The remaining 17 were school children ranging in age from 10 to 18, of which 16 were life-time residents of either Washington County or other parts of Utah and one has lived in Washington County for seven years.

Other information was collected to evaluate possible etiological factors such as familial goiter, diet, and clinical x-ray exposure. At this stage of the investigation it is improper to draw even preliminary conclusions about etiology.

It is the opinion of the examining group that for health reasons as well as completion of the diagnostic portion of the study, the 18 Utah cases should receive early clinical followup in order to make a differential diagnosis from among the following possibilities: non-toxic nodular goiter, thyroiditis, and neoplastic disease, both benign and malignant. DRH plans to contract with the Utah State Health Department to handle the clinical followup of the Utah subjects. The teams of examining physicians considers that the followup should include biopsy.

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The parents of the children involved in further clinical evaluation were told only that their children required further tests. Although the parents have not been given any detail as to the nature of the followup necessary, nor the clinical possibilities which exist, they are generally familiar with the purpose of the study.

Several attempts have been made by AEC and outside scientists to reconstruct probable radiation exposures received in southern Utah during the fifties and to draw conclusions as to the health consequences, with widely varying results and conclusions. These questions also have been raised by the Joint Committee on Atomic Energy of the Congress, particularly at hearings in 1957, 1963, and 1965. The various Public Health Service studies mentioned in the September 16, 1965, news release are, to some extent, in response to specific interest on the part of JCAE displayed during the 1963 hearings. The studies also reflect a growing concern by the Public Health Service and the Health Department of Utah.

The public relations and operational problems inherent in this study are extremely complex. The fact of the followup examinations is likely to become public knowledge in the very near future. The press, and some members of Congress, probably will demand early disclosure of the final diagnostic results. If cancer is found in any of the children, early examination of all other children in affected areas will have to be considered.

Exaggerated and unbalanced press accounts could hamper not only the Government's nuclear testing program but also peaceful applications of nuclear energy. On the other hand, any real or apparent attempt to "cover up" the results of these studies would result in great damage to the reputation of the Federal Government.

For these reasons we believe that if, at any stage of these studies, deleterious health effects are uncovered in which there is any possibility that radiation exposures from nuclear weapons tests may be an etiological factor, the President should be so informed so he can decide how this information can best be made public with due regard for its effect on national policies related to international relations, defense, and peaceful applications of nuclear energy.

Pending resolution of these questions there are three possible courses of action for answering any press or other public inquiries which may arise concerning the children who receive further examinations:

1. Refuse to answer any spontaneous questions on the grounds that the study is still in progress and no firm information is available.

2. Respond to specific queries with an interim statement along the lines of the attachment.

3. Not wait for such queries but issue a press announcement based upon the suggested interim statement; this to be issued through regular press mechanisms of HEW and the Utah State Health Department following customary clearance with AEC and the White House.

We recommend the third course of action.

For your information Dr. Charles Dunham, Chief of the Division of Biology and Medicine, and Mr. Duncan Clarke, Chief of Information, AEC, have been apprized of these developments.

It is recommended that the Secretary alert the Chairman of AEC regarding these preliminary findings and the possible courses of action.

Donald R. Chadwick, M.D.

Enclosure

DRCHADWICK/jaj/10-4-65

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